

Complete Summary

TITLE

Major depressive disorder: percent of patient episodes with a new diagnosis of depression and receiving a new prescription for antidepressant medication who have adequate medication for at least 84 treatment days during the acute phase.

SOURCE(S)

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Jan 5. 234 p.

Brief Abstract

DESCRIPTION

This measure assesses the percent of patient episodes with a new diagnosis of depression and receiving a new prescription for antidepressant medication who have adequate medication for at least 84 treatment days during the acute phase.

RATIONALE

In a given year, an estimated 18.8 million American adults suffer from a depressive disorder or depression. A depressive disorder is an illness that disrupts a person's mood, behavior, physical health and thoughts. There are three main depressive disorders: major depression, dysthymia (chronic/mild depression), and bipolar disorder. Without treatment, symptoms associated with disorders can last for years, or can eventually lead to death by suicide or other causes. Fortunately, many people can improve through treatment with appropriate medications.

This measure assesses the adequacy of clinical management of new treatment episodes for patients with a major depressive disorder.

PRIMARY CLINICAL COMPONENT

Major depressive disorder; antidepressant medication management; adequate medication coverage

DENOMINATOR DESCRIPTION

Patient episodes with a new diagnosis of depression and receiving a new prescription for antidepressant medication (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Patient episodes with a new diagnosis of depression and receiving a new prescription for antidepressant medication who have adequate medication for at least 84 treatment days during the acute phase

Evidence Supporting the Measure

PRIMARY MEASURE DOMAIN

Process

SECONDARY MEASURE DOMAIN

Not applicable

EVIDENCE SUPPORTING THE MEASURE

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [VHA/DOD clinical practice guideline for the management of major depressive disorder in adults.](#)

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Jan 5. 234 p.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

External oversight/Veterans Health Administration
Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses
Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

- In a given year, 9.5% of the American adult population has a depressive disorder.
- Bipolar disorder affects approximately 2.3 million American adults.

EVIDENCE FOR INCIDENCE/PREVALENCE

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Jan 5. 234 p.

ASSOCIATION WITH VULNERABLE POPULATIONS

- Depression affects people of all ages but the illness often first occurs during a person's late 20s. Elderly people also suffer from high rates of depression.
- Women are twice as likely to suffer from depression as men (12%, as opposed to 6.6%).

EVIDENCE FOR ASSOCIATION WITH VULNERABLE POPULATIONS

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Jan 5. 234 p.

BURDEN OF ILLNESS

Nearly 1 in 6 people with severe, untreated depression commits suicide.

EVIDENCE FOR BURDEN OF ILLNESS

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Jan 5. 234 p.

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Patient episodes with a new diagnosis of depression and receiving a new prescription for antidepressant medication

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR (INDEX) EVENT

Clinical Condition
Therapeutic Intervention

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Patient episodes with a new diagnosis of depression and receiving a new prescription for antidepressant medication*

*Note:

Patient Episode: Circumstances in which a patient meets the qualifying criteria. It is possible for a patient to be included in this measure more than once if the qualifying criteria are met.

New Diagnosis of Depression: patients who have BOTH:

- Index diagnosis of depression, either inpatient or outpatient, either primary or secondary, to include International Classification of Diseases, Ninth Revision (ICD-9) codes of:
 - 296.2 (Major depressive disorder, single episode), 296.3 (Major depressive disorder, recurrent episode), 298.0 (Depressive type psychosis), 300.4 (Neurotic depression), 309.1 (Prolonged depressive reaction), or 311 (Depressive disorder, not elsewhere classified)
 - Date of the index diagnosis is the date of the outpatient visit or date of discharge from inpatient status
- No prior diagnosis of depression for at least 120 days in Veterans Health Administration (VHA) prior to the index diagnosis of depression. ICD-9 codes used for a prior diagnosis of depression are: 296.2 to 296.9, 298.0, 300.4, 309.0, 309.1, 309.28, or 311.

New Prescription for Antidepressant Medication: must have BOTH:

- Index prescription for antidepressant medication** within the period of 30 days prior through 14 days after the index diagnosis of depression
- No prior prescription for antidepressant medication in VHA for at least 90 days prior to index antidepressant prescription. To know that the patient wasn't 'finishing' a prior prescription during the 90 days prior to a diagnosis, data is reviewed back to 119 days.

**Refer to the original measure documentation for a list of antidepressant medications.

Exclusions

- Admissions with acute psych or substance abuse during the 84 day retention period as identified by Diagnosis-Related Group (DRG) 424-432 AND a principal diagnosis of 290, 293-302, 306-316

- Other institutional admissions are not addressed by Health Plan Employer Data & Information Set (HEDIS) and not considered in this metric, e.g. admission to nursing home care unit or domiciliary
- Deaths if the date of death is on file during the 84-day retention period.
- Patients not having an 'anchoring visit' to anywhere in VHA in any clinic in the 12 months prior to the index date of the 'new' diagnosis and medication will be excluded from the denominator.

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Patient episodes with a new diagnosis of depression and receiving a new prescription for antidepressant medication who have adequate medication for at least 84 treatment days during the acute phase*

*Note:

Acute Phase Treatment: begins with the date of the qualifying diagnosis and ends 84 days later.

Adequate Medication Treatment Days: Of the 114 days following the index prescription date, the patient has medication to cover at least 84 days. The allowable 'gap' in medications of up to 30 days accommodates clinical practice of 'washing out' one medication before starting another if needed, and/or delay in filling/picking up a prescription. Overlapping prescriptions of different medications are not counted twice. For example, if prescription 'A' was given for 30 days, the patient did not tolerate it, came in at 15 days and received a different/new medication 'B' for 15 days - the total count for the two medications is 30 days. However, if a patient refills a prescription for the same medication early, the overlapping days will be counted. For example, if a prescription is given for 30 days with 1 refill. If the patient receives the refill 5 days prior to the end of the initial 30 day period, the total treatment days will be 60 days.

Exclusions

Unspecified

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison
Prescriptive standard

PRESCRIPTIVE STANDARD

Fiscal year (FY) 2005 targets for medication coverage:

- Fully Successful: 74%
- Exceptional: 77%

EVIDENCE FOR PRESCRIPTIVE STANDARD

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Jan 5. 234 p.

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

New diagnosis of depression - medication coverage.

MEASURE COLLECTION

Fiscal Year (FY) 2005: Veterans Health Administration (VHA) Performance Measurement System

MEASURE SET NAME

Mental Health

MEASURE SUBSET NAME

Major Depressive Disorder

DEVELOPER

Veterans Health Administration

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Nov

REVISION DATE

2004 Dec

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Jan 5. 234 p.

MEASURE AVAILABILITY

The individual measure, "New Diagnosis of Depression - Medication Coverage," is published in "FY 2005 VHA Performance Measurement System: Technical Manual."

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NQMC STATUS

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